

## Application Data Sheet

### Application Information

Application number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: NONE  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:: NO  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: DELIVERING COMPOUNDS TO THE BRAIN  
BY MODIFYING PROPERTIES OF THE BBB  
AND CEREBRAL CIRCULATION  
Attorney Docket Number:: 001205.00002  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 8  
Small Entity?:: YES  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	IL
Status::	Full Capacity
Given Name::	Yossi
Middle Name::	
Family Name::	GROSS
City of Residence::	Moshav Mazor
State or Province of Residence::	
Country of Residence::	IL
Street of mailing address::	10 Ha'Notea Street
City of mailing address::	Moshav Mazor
State or Province of mailing address::	
Country of mailing address::	IL
Postal or Zip Code of mailing address::	73160

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	IL
Status::	Full Capacity
Given Name::	Benny
Middle Name::	
Family Name::	SHALITA
Name Suffix::	
City of Residence::	Jerusalem
State or Province of Residence::	
Country of Residence::	IL
Street of mailing address::	44 Ramat-Hagolan Street
City of mailing address::	Jerusalem
State or Province of mailing address::	
Country of mailing address::	IL
Postal or Zip Code of mailing address::	97704

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	IL
Status::	Full Capacity
Given Name::	Alon
Middle Name::	
Family Name::	SHALEV
Name Suffix::	
City of Residence::	Raanana
State or Province of Residence::	
Country of Residence::	IL
Street of mailing address::	9 Wingate Street
City of mailing address::	Raanana
State or Province of mailing address::	
Country of mailing address::	IL
Postal or Zip Code of mailing address:	43729

## **Correspondence Information**

Correspondence Customer Number:: 22907

## **Representative Information**

Representative Customer Number:: 22907

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IL2003/000631	31 July 2003
PCT/IL2003/000631	Non-provisional of	60/400,167	31 July 2002

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

## Assignee Information

Assignee name:: BRAINSGATE LTD.  
Street of mailing address:: P.O.Box 2249  
City of mailing address:: Ra'anana  
State or Province of mailing address::  
Country of mailing address:: IL  
Postal or Zip Code of mailing address:: 43654